## HEALTH MANAGEMENT ASSOCIATES

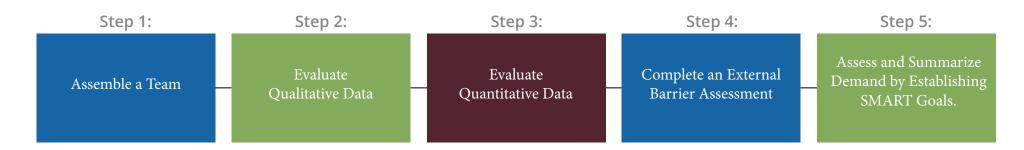


#### **The Purpose of Demand Analysis:**

To provide an overall process to perform demand analysis for telemedicine services. The process includes step-by-step instructions as well as sub-tools for qualitative and quantitative assessment to determine unmet community need that could be remedied by telehealth services.

Telehealth is a solution to a problem. In order to have a successful telehealth program, you must be able to identify the community need and develop a strategy to solve it. After performing the demand analysis, you should have a good idea of community need and external barriers, and a plan to meet those needs through telehealth service delivery.

### Steps for Demand Analysis:



#### **Assemble a Team**

The primary care practice will assemble a clinical and non-clinical team to coordinate and evaluate demand analysis activities to determine community need to be met through telehealth services.

### Guiding Principles:

# Who should be on the Demand Analysis Team?

- + Staff with experience in data and analysis, billing/coding, IT, and/or care management. Experience with telehealth or telehealth-like activities not necessary, but an added bonus.
- + Members with knowledge of community assessment.
- + Other team members may include referral coordinator, provider champion, patient representatives, and Public Health representative.

Demand Analysis
may be performed
by individual primary
care practice or
several primary care
practices may choose
to aggregate Demand
Analysis and develop
telehealth services that
would serve patients
from all practices.



The team may not meet all physically meet together, but data might be collected from all.



Demand Analysis
Team Membership
may overlap some with
the Readiness SelfAssessment team.



## Demand Analysis Team Member Worksheet

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Team Member Title				
Member Background, Skill Set, Responsibilities				

## Demand Analysis Team Member Worksheet

| Team Member Title                                 |
|---|---|---|---|---|
| Member Background, Skill<br>Set, Responsibilities |

#### **Evaluate Qualitative Data**

Relying on anecdotal experience, patient feedback or provider stories, develop one or more Use Case Scenarios that demonstrate how telehealth services would improve healthcare quality and health outcomes for your practice and community.

Each Use Case Scenario should describe a patient, a clinical problem, an access problem, and demonstrate how telehealth would solve this access issue more efficiently than other solutions. While real patient examples are most powerful, the Use Case Scenarios can show representative examples as well. If you need help developing Use Case Scenarios, convene a small stakeholder focus group, including patients and/or additional staff.

## Barriers might include:

Geographic
(e.g. long travel times to tertiary care center)

Timeliness
(e.g. unable to get timely specialty appointment or need for urgent care), or

Patient preference
(e.g. patient mobility such as elderly patient who cannot easily come to the office.)

# **Guiding Principles:**

- **⊞** Start as broad as possible to demonstrate all of the needs and barriers to access to care.
- Include all identified problems; even those that appear to not have a solution.

### General Use Case Scenario Example:

#### **PATIENT**

58 year old female, member of practice for 5 years. Married. Grown daughter living in another state.

#### **⊘** CLINICAL PROBLEM

Long-standing rheumatoid arthritis. Currently stable on methotrexate and adalimumab. The adalimumab was started by the rheumatologist at the tertiary care center last year. She is tolerating well.

#### **⊘** ACCESS PROBLEM

Nearest rheumatologist is 1.5 hours away and patient has difficulty driving herself due to joint mobility and husband has limited time off work.

#### **SECOND SECUTION**

Community has lacked rheumatology services for several years. Unlikely to recruit in near future. Patient is well established at PCP practice. Could easily connect PCP office to tertiary care rheumatologist for periodic review of RA management.

# **USE CASE SCENARIO EXAMPLE 1:** PATIENT \_\_\_\_\_ CLINICAL PROBLEM \_\_\_\_\_ ACCESS PROBLEM \_\_\_\_\_ TELEHEALTH SOLUTION

# **USE CASE SCENARIO EXAMPLE 2:** PATIENT \_\_\_\_\_ CLINICAL PROBLEM \_\_\_\_\_ ACCESS PROBLEM \_\_\_\_\_ TELEHEALTH SOLUTION

USE CASE SCENARIO EXAMPLE 3:
PATIENT
CLINICAL PROBLEM
ACCESS PROBLEM
TELEHEALTH SOLUTION

USE CASE SCENARIO EXAMPLE 4:
PATIENT
CLINICAL PROBLEM
ACCESS PROBLEM
TELEHEALTH SOLUTION

#### **Evaluate Quantitative Data**

This steps include two elements. The first is to evaluate practice and community data to discover other potential Use Case Scenarios. The second is to develop a quantitative estimate of the volume of telehealth patient visits that may be generated for the Use Case Scenarios that were developed in the previous step.

Assemble data sources using the template below and develop additional Use Case Scenarios to add to Step 2.

Data Source	Data Location	Information from Data	Assessed During Demand Analysis? If yes, include results.
Community Health Needs Assessment	Required for all hospitals every 3 years; posted on hospital website or publicly available	May identify barriers or clinical areas of reduced access	
Public Health Needs Assessment	County Health District	May identify barriers or clinical areas of reduced access	
Provider Surveys	Practice or Health System may perform	May show clinical services where providers identify access issues for patient populations	
Patient Surveys	Practice or Health System may perform	May reveal access issues for patients	
Member Surveys	Health plans or Medicaid	Payers often perform analysis of network adequacy and may be able to share information	
Referral Data	Practices may track referrals through EMR or other process	Show volume of referrals outside of primary care practice; may track "no show" to referrals	
Practice Administrative Data	EMR or practice administrative system	Payer mix, diagnosis volume, geographic analysis of patients	
Other data sources			

#### **Complete an External Barrier Assessment**

The purpose of this step is to begin determine the extent to wish external barriers may be in conflict with identified Use Case Scenarios. For example, do regulatory requirements prevent certain specialty care partnerships? Is your community – both health care system and patient population – supportive and accepting of telehealth services?

(The Readiness Self-Assessment Tool will expand upon external and internal barrier evaluation.)

#### **External Barrier Assessment** -

	POTENTIAL BARRIER					
	Regulatory Requirements	Payer Requirements (ex: Medicare Telehealth Payment Eligibility Analyzer')	Regional Connectivity (broadband access)	Impact on Medical Neighborhood	Community Acceptability	Other
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#### **Assess and Summarize Demand by Establishing SMART Goals**

Establish Specific, Measurable, Actionable, Relevant, and Time-bound (SMART) goals to address identified demand. If SMART goals cannot be established to meet demand, then you must go back to re-evaluate and repeat previous steps.

**SMART Goal Example:** XYZ Primary Care will be the originating site for a weekly total of 10 specialty care telehealth visits for the specialty services of neurology, rheumatology, and behavioral health.

G	OAL
Sp	<b>Decific</b> (Is there a clear picture of what success would be within a specific area of performance?)
M	easureable (Can results be objectively measured and evaluated?)
 Ac	ctionable (Is the goal achievable?)
Re	elevant (Does the goal reasonably align with clinic strategy?)
_ Ti	me-bound (When will you deliver the result? Have you set any incremental measurement points?)

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